Procedure code conversion chart for child care coordination services

The following table lists the nationally recognized Healthcare Common Procedure Coding System (HCPCS) procedure codes that providers will be required to use when submitting claims for child care coordination services. Maximum allowable fees listed below are the proposed fees and may be subject to change. Wisconsin Medicaid will notify providers if the fees change from those printed below.

Before HIPAA implementation

After HIPAA implementation

Local procedure code W7095	Local procedure code description Risk assessment — Child care coordination	HCPCS procedure code T1016	HCPCS procedure code description Case management, each 15 minutes	Required modifier and description U1 Assessment	Maximum allowable fee \$10.70 each 15 minutes
W7096	Initial care plan development — Child care coordination	T1016*	Case management, each 15 minutes	U2 Initial care plan development	\$10.70 each 15 minutes
W7097	Ongoing care coordination and monitoring (two months to seven years old)	T1016*	Case management, each 15 minutes	U3 Ongoing child care coordination and monitoring	\$10.70 each 15 minutes

^{*} Procedure code T1016 with modifier "U2" modifier and T1016 with modifier "U3" are only allowable if diagnosis code V61.8 (other specified family circumstances) is indicated.